

### Civil Society Priorities for the COP 21

Maputo, 21st of April 2021



### 4 POINTS TO DEBATE

- Institutional Capacity building for the CSO
- Community led Monitoring.
- Strengthening Community Systems for the treatment of ART and TB.
- Specific Population Groups.



# Institutional Capacity building for CSOs

- Accelerate the transition from implementation to local partners, training and maintenance of human resources necessary both for service provision, as well as for advocacy and operational research
- Strengthening the representation and coordination of CSO (PLASOC-M, focal points and constitutions) with a view to achieving targets 95-95-95 for 2030;
- The engagement of CSO in responding to the demands of the population to achieve the control of the spread of HIV infection;
- Massify and reinforce the dissemination of the user's letter
- Empower CSO for advocacy campaigns related to policies, laws, regulations and social norms that hinder or prevent equitable access to health services;



#### **Community Led Monitoring**

Make resources available to CLM to ensure access and availability of quality health services.

- Capacity building of CSO, communities and service providers for the implementation of CLM;
- Implementation of CLM by CBO and Communities to boost the level of response towards HIV / TB;



#### **Strengthening Community Systems**

Make resources available to expand the participation of CBO in health committees, co-management and ART;

- Increase investment to strengthen community systems in order to guarantee the sustainability of the program itself. To this end, investing in the components of i) provision of services at the community level, ii) support systems for beneficiaries who seek services in the public and community sector, and iii) improvement of the implementation environment, including adapting the response to the context of COVID-19.
- Strengthen the capacity of CBO to assist with sample collection at Community level.
- Train and involve CSO in the Undetectable campaign equal to the Non-transferable (I = I)
- Increase the value of annual grants to CBO up to a maximum of \$100,000U per year;
- Reinforce the creation and strengthening of Community Adherence Support Groups - (CASG);



#### **Specific Population Groups**

#### PC

- Fully implement the commitments agreed upon in COP20
  for the key population's component, with a special focus on the KPIF
  implementation component, retention in care and client-centered
  treatment and expanding access to PrEP.
- Improve the involvement of key populations and their networks in the design of interventions, definition of geographic coverage and its goals, implementation and evaluation of results. To this end, investing in increasing technical capacities and simplifying the language of the information made available.
- Improve the program's approach to the key population, in order to respond to their needs and specificities, more specifically the provision of integrated packages of prevention, treatment and care services regardless of the HIV Status.



### **Specific Population Group**

#### **AGYW/Dreams**

- Provide access to Inclusive Sex Education to the AGYW through (I) actions that stimulate family dialogue and parental education sessions on SRH; (II) training for Peer Educators and / or Youth Associations including for Adolescents and Youth with disabilities in matters of ESA, (III) expansion of clubs of youth interest in schools and in the community, enhancing institutions of the faith; (IV) producing and disseminating IEC materials on DSSR suitable for adolescents and young people with disabilities.
- Improve access to Sexual and Reproductive Health Services for AGYW through (I) improving and expanding Friendly Services to Adolescent and Youth (SAAJs) and reinforcing with Human Resources, (II) making condoms available in places of youth interest; (III) creation of psychosocial support / monitoring teams and palliative care for adolescents and young people, (IV) opening of corners in the School.



### **Specific Population Group**

#### **FBO**

Provide resources for better engagement of FBO as agents of change in the mobilization and sensitization of communities, with a view to improving the quality of life and health in the community of:

- PLHIV and other priority groups;
- In the mass distribution of ARVs in public pharmacies;
- In the massification of self-test, adherence and retention in ART.

#### **PLHIV**

- Revitalize mass and interpersonal communication;
- Insist on extending the hours for services directed to PLHIV;
- Reinforce male engagement models (male champions / peer educators, FBO)



## Thank you